FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB Number: Expires: April 30, 2008 Estimated average burden

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	CEO NE 121
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Texakoma Higgins 356-1 Well	CC THOSE OF THE CEIVEO CO.
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	7006 3 2006
A. BASIC IDENTIFICATION DATA	15/5/3 CLON
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Texakoma Operating L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 5400 LBJ Freeway, Suite 500, Dallas, Texas 75240	Telephone Number (Including Area Code) (972) 701-9106
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business To initiate, manage, acquire, supervise and to otherwise engage in the oil and g business.	
Type of Business Organization corporation X limited partnership, already formed other (p	please specify): PROCESSED
Month Year Actual or Estimated Date of Incorporation or Organization: 013 05 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

-ATTENDION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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2. Enter the information re		owing: er has been organized wi	thin the nast five years:		
Each promoter of 1	he issuer, if the issu	er nas been organized wi	et the vote or disposition	of 10% or more of a	a class of equity securities of the issu
Each beneficial ow	ner having the power	corporate issuers and of c	cornerate general and mai	aging nartners of p	artnership issuers: and
			corporate general and man	laging paraiers or p	
Each general and it	nanaging partner of	partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,		dustion III			
Texakoma Explor Business or Residence Addre	ation & Pro	street, City, State, Zip Co	de)	_ _	
5400 LBJ Freewa					
Check Box(es) that Apply:	Promoter	Beneficial Owner	X Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,		 		-	
Stapleton, Will Business or Residence Addr	iam Dale	Street, City, State, Zip Co	ode)		
5400 LBJ Freewa					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	<u> </u>			
Kennedy, Scott Business or Residence Addr	Durand	Street City State 7in Co	nde)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	·			
Kennedy, Shea I Business or Residence Add	ress (Number and	Street, City, State, Zip C			
5400 LBJ Freewa	y, Suite 50			D Dimento	General and/or
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first					
Kennedy, Dean I Business or Residence Add	ress (Number and				
5400 LBJ Freewa		Dallas, Te: Beneficial Owner	Executive Office	r Director	General and/or
Check Box(es) that Apply:	Promoter	D Beneficial Owner			Managing Partner
Full Name (Last name first	, if individual)				٠
Business or Residence Add	iress (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Office	r Director	General and/or Managing Partner
Full Name (Last name firs	t, if individual)				
Business or Residence Ad	iress (Number and	Street, City, State, Zip C	Code)		
	(Use bl	ank sheet, or copy and us	e additional copies of this	s sheet, as necessary	γ)

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4	Secretary of the second to sell to per protection in this offering?							Yes [X]	No □				
۱.	Answer also in Appendix, Column 2, if filing under ULOE.												
2.	The second secon							*******	\$ <u>i</u> 19,5	<u>i00</u>			
												Yes	No
3.	Does the	offering p	ermit joint	ownership	of a si	ngle unit?			ivan dirac	elv se indi	rectly any	X	
4.	commiss	ion or simi	lar remuner	stion for so	dicitati	who has bee	ers in conne	ction with s	sales of sec	unues in ir	ie offering.		
	If a nerso	n to be list	ed is an asso	ociated per	son or a	igent of a brol more than fiv	ker or deale	r registered	with the S.	EC and/or	with a state		
	a broker	or dealer,	you may se	t forth the	inform	ation for that	broker or	dealer only.	•				
Ful	l Name (L	ast name f	irst, if indi	vidual)	. ,								-
	<u>Texal</u>	coma Fi	nancia]	Inc.	Ptront	City State '	Zin Code)	•	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>		
Bu.						City, State, 2 Dallas,		75240					
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Fu	Il Name (l	ast name t	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	umber and	Street	, City, State,	Zip Code)						
_				<u> </u>		<u>:</u>						·	
Na	me of Ass	ociated Br	oker or Dea	iler									
St	ates in Wh	ich Person	Listed Has	Solicited	or Inter	nds to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	*********	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		·				l States
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	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK.	OR WY	PA
	· RÎ	SC	SD	TN	TX	ŪT	VT	VA	WA.	WV	WI)		PR
Fı	ıll Name (Last name	first, if indi	vidual)									
n		Decidence	Address ()	Jumber an	d Stree	t, City, State	Zin Code)	 					
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N	ame of As	sociated Br	oker or De	aler			-				-		
	· .	ich Darace	Listed Una	Solicited	or Inte	nds to Solici	Purchaser						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)								. Al	ll States				
		·											
	AL	AK	AZ	AR KS	CA KY		CT ME	DE MD	DC MA	FL MI	. GA MN	MS MS	MO
	MT	IN NE	IA NV	NH	NJ		NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX		VT	VA	WA	WV	WI	WY	PR

io ik Kata	C.OFFERINGERICE NUMBERIOF INVESTORS EXPENSES AND USE OF THE	KUCEEDS	***************************************
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate	Amount Already Sold
	Type of Security	Offering Price	2010
	Debt		\$
	Equity	<u> </u>	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	S	\$
	Partnership Interests		\$
	Other (Specify Fractional Undivided Working Interests	6,630,000	\$ <u>78,000</u>
	Total	6,630,000	<u>\$ 78,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
٠		Number Investors	Aggregate Dollar Amount of Purchases
			\$ 78,000
	Accredited Investors		
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
,	Regulation A		\$
	Rule 504		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$ <u></u>
	Sales Commissions (specify finders' fees separately)(IncludesDueDiligence.)	s 795,600
	Other Expenses (identify) (Expense Reimbursement)	<u> </u>	s 198,900
	Total		s 994,500

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·\ <u>-</u>	and total expenses furnished in response to Part C- proceeds to the issuer."	fering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross	S	_{\$} 5,635,500
5.	each of the purposes shown. If the amount for	proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and I of the payments listed must equal the adjusted gross art C — Question 4.b above.	1	
			Payments to	
			Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		· 🗆 \$. 🗆 \$
	Purchase of real estate		. 🗆 \$. S
	Purchase, rental or leasing and installation of n	nachinery		
	and equipment			
	* -	facilities	· 🔲 \$	_ 🗆 \$
	Acquisition of other businesses (including the offering that may be used in exchange for the a issuer pursuant to a merger)	value of securities involved in this assets or securities of another	. □\$	□\$
		·		
	Westing comital		. I□ \$	□. \$
	Working capital	ing and if	thru D&l	4,498,176
	completing and equipping of	ing and if warranted, a wildcat well to be drilled in	C&E	1,137,324
	Lipscomb County, Texas to an	approximate total measured		rn ¢
	horizontal depth of between	10,900' and 12,500' more or les	ss.	
	Column Totals		🔲 \$ <u>`</u>	_ []\$ 5.635.50 0
	Total Payments Listed (column totals added)		\$ <u>.5</u>	<u>.635,50</u> 0
		D. FEDERAL SIGNATURE		
sio	nature constitutes an undertaking by the issuer to	the undersigned duly authorized person. If this notifurnish to the U.S. Securities and Exchange Commaccredited investor pursuant to paragraph (b)(2) of	iission, upon writt	ule 505, the following en request of its staff,
Iss	uer (Print or Type)	Signature ////	Date	
T	exakoma Operating, L.P.	foll North	10/12/06	
	me of Signer (Print or Type)	Title of Signer (Print of Type) Presiden		
W	illiam Stapleton		tion, L.L.C	,
_		Its Gene	ral Partner	

ATTENTION

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)